

GOVERNMENT OF GUAM  
DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES  
DIVISION OF ENVIRONMENTAL HEALTH

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INSPECTION REPORT  
LAUNDRY AND DRY CLEANING

INSPECTION	GRADE	Inspection Date	ESTABLISHMENT NAME	
Regular <input checked="" type="checkbox"/>	10/A	05/03/2018	BEST WASH & DRY	
Follow-Up <input type="checkbox"/>		Inspection Time	OWNER/OPERATOR	
Complaint <input type="checkbox"/>		10 Hr. 00 Min.	BEST WATER, WATER AND ICE, INC.	
Investigation <input type="checkbox"/>		Travel Time	LOCATION	
Other (Specify below) <input type="checkbox"/>		11 Hr. 50 Min.	LOT 2414-4 UNIT B SUNNY BLDG. 134 TANGERINE LN, MANAGUA, GUAM	
		Sanitary Permit #	ESTABLISHMENT TYPE	PERMIT CATEGORY STATUS (Circle One)
		170002040	PUBLIC LAUNDRY	Perm. /Temp. / <u>Current</u> /Expired

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection, or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal, a written hearing request must be submitted before the indicated correction date.

	A REGULAR INSPECTION WAS CONDUCTED TODAY. PREVIOUS INSPECTION DATED 06/15/2017 RESULTED IN A GRADE/RATING OF 2/A. THE FOLLOWING WERE OBSERVED:	DEMERITS
12.	NO HOT WATER WAS PROVIDED IN HANDWASHING SINK NEAR WASHER BANK 1 AND BOTH MALE AND FEMALE RESTROOM'S HANDWASHING SINK. AS PER CUSTOMER, THERE IS NO HOT WATER IN WASHING MACHINES.  A SUFFICIENT SUPPLY OF RUNNING COLD WATER AND HOT WATER SHALL BE PROVIDED IN ALL HANDWASHING SINKS AND WASHING MACHINES WITH A MINIMUM TEMPERATURE OF 120°F AND MAXIMUM TEMPERATURE OF 140°F TO FACILITATE WITH PROPER HAND-WASHING HYGIENE AND PROPER WASHING OF CLOTHES/LINENS.	4 06/02/2018
20.	NO HANDSOAP <del>WAS</del> PROVIDED FOR BOTH MALE AND FEMALE RESTROOM SINKS. NO PAPER TOWEL PROVIDED FOR HANDWASHING SINK NEAR WASHER BANK 1. * CORRECTIVE ACTION: PERSON-IN-CHARGE (PIC) PROVIDED HANDSOAP FOR RESTROOM SINKS AND PAPER TOWEL FOR HANDWASHING SINK NEAR WASHER.  SOAP AND PAPER TOWEL SHALL BE PROVIDED TO FACILITATE WITH PROPER HANDWASHING HYGIENE.	COS
27	WASTE RECEPTACLES THROUGHOUT THE WHOLE ESTABLISHMENT FOUND WITH A HOLE ON THE LIDS/COVERS.  RECEPTACLES SHALL BE PROVIDED WITH TIGHT-FITTING LIDS, <del>PODS</del>	4 06/02/2018

I have read and understand the above violation(s) and I am aware of the corrective measure to be taken.

\*When any of the following items are cited above they shall be corrected within ten days of this inspection:  
(7), (8), (9), (10), (11), (12), (14), (15), (19), (20), (21), (24), (25), (27), (32), (33), (34), (35), and (37).

RECEIVED BY (Name and Title)

Salg, Dominica = Crew member *[Signature]*

DEH INSPECTOR (Name and Title)

V. RAYMUNDO, EPHO I *[Signature]* 300-9570



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Follow-Up <input type="checkbox"/>		Inspection Time	OWNER/OPERATOR	
Complaint <input type="checkbox"/>		10 Hr. 00 Min.	BEST WATER, WATER AND ICE, INC.	
Investigation <input type="checkbox"/>		Start Time	LOCATION	
Other (Specify below) <input type="checkbox"/>		11 Hr. 50 Min.	LOT 244-4 UNIT B SUNNY BLDG. 134 TANGERINE LN, MANGILAO, GUAM	
		Sanitary Permit #	ESTABLISHMENT TYPE	PERMIT CATEGORY STATUS (Circle One)
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DEMEPITC:

- OR COVERS, AND SHALL BE KEPT COVERED WHEN NOT IN ACTUAL USE TO PREVENT HARBORAGE OF PESTS.
28. OUTSIDE WASTE RECEPTACLE FOUND WITH A HOLE ON THE LID/COVER. 2  
CONTAINERS STORED OUTSIDE THE ESTABLISHMENT SHALL BE PROVIDED WITH TIGHT-FITTING LIDS, DOORS OR COVERS, AND SHALL BE KEPT COVERED WHEN NOT IN ACTUAL USE TO PREVENT HARBORAGE OF PESTS. 06/02/2018
- PHOTOS WERE TAKEN.  
REMOVED PLACARD "A" NO. 02146.  
POSTED PLACARD "A" NO. 02728.  
DISCUSSED THIS REPORT WITH DOMINICA SALAS, CREW MEMBER.

I have read and understand the above violation(s) and I am aware of the corrective measure to be taken.

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RECEIVED BY (Name and Title)

Salas, DOMINICA - crew member IS

DEH INSPECTOR (Name and Title)

V. RAYMUNDO, EPHO I / Or 300-9570